· PTQ/SB/01.02 & 04 COMBINED (09-04) AW (10-04)

## DECLARATION/ MATB-400US Attorney Docket Number: **POWER OF ATTORNEY** First Named Inventor: Christian F. Greig FOR UTILITY OR DESIGN COMPLETE IF KNOWN PATENT APPLICATION Application Number: □ Declaration □ D Declaration Supplemental Filing Date: Submitted Submitted after Initial Declaration With british Filing (surcharge (37 CFR 1.16 (e)) (37 CFR 1.87) Art Unit: (37 CFR 1.63) required) Examiner Name: I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention enlitted: SYSTEM AND METHOD FOR LASER WELDING FOILS (Title of the Invention) the specification of which . is attached hereto OR was filed on (MM/DD/YYYY) 08/13/2004 as United States Application or PCT International Application Number PCT/US2004/026513 and was amended on (MIM/DD/YYYY) 02/07/08 by Prefiminary Amendment (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amandment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(e) for patent, inventor's or plant breeder's rights certificate(e), or 365(a) of any PCT transational application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT intermellonal application having a filing date before that of the application on which priority is claimed. **Prior Foreign Application** Foreign Filing Date **Priority Not** Certified Copy Attached? Number(s) Country (NYYYOD/YYYY) Claimed Yes No $\Box$ $\Box$ Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

## Declaration/Power Of Attorney for Utility or Design Patent Application (continued) Practitioners at Customer Number 23122 Practitioner(s) named below: Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Direct all correspondence to: Practitioners Customer Number listed above; OR Correspondence Address Below Name: Address: City: State: Zip: Country: Telephone: Fax: I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon. Name of Sole or First Inventor: A Petition has been filed for this unsigned inventor. Given Name (first nd middle (if any)) Family Name or Sumame CHHSU Inventor's Signature Date: 13 Mm of Residence: City: Westford Country: US Citizenship: US **Hailing Address: 14 Maple Street** Mailing Address: City: Westford State: MA Zip: 01886 Country: US Additional inventors are listed on the next page.

## Declaration/Power Of Attorney for Utility or Design Patent Application (continued)

Name of Second Inventor:		A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			Oate:
Residence: City:	State:	Country:	Otizenship:
Mailing Address:			
Mailing Address:			
City:	State:	Zip:	Country:
Name of Third Inventor:		A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Sumame	
Inventor's Signature			Date:
Residence: City:	State:	Country:	Citizenship:
Mailing Address:			
Mailing Address:			
City:	State:	Zlp:	Country:
Name of Fourth Inventor:		A Petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			Date:
Residence: City:	State:	Country:	Citizenship:
Malling Address:			
Mailing Address:			
City:	State:	Zip:	Country:
Additional inventors are listed on Supplemental Sheet(s).			